



Patient-Centered Primary Care Home Program Update

March 2022

New research: smaller primary care practices can improve clinical quality measure performance by building improvement capacity

A recent study, made possible by [AHRQ's EvidenceNOW Initiative](#), found that small primary care practices in Oregon, Washington, and Idaho were able to improve their performance on clinical quality measures for cardiovascular disease (appropriate aspirin use, blood pressure control, and smoking screening/cessation counseling) after implementing strategies to build capacity for quality improvement.

Evidence-Based Strategy		PCPCH Standard	
1	Embed clinical evidence into daily work to guide how care is delivered to patients	3.A, 4.C, 4.D	Specifically, the Healthy Hearts Northwest Cooperative supported practices with 10 clinicians or less in implementing seven evidence-based strategies over the course of 15 months, which led to improvement on all three clinical quality measures. Details on these seven strategies can be found in the Quality Improvement Change Assessment . The PCPCH model also offers a framework for these strategies. The specifications for each of the standards below can be found in our PCPCH Technical Assistance Guide .
2	Utilize data to understand and improve clinical performance measures	1.A, 2.A, 2.B, 2.D, 6.C	
3	Establish a regular QI process involving cross-functional teams	2.C, 2.D	
4	Identify at-risk patients through proactive population management and outreach	1.D, 2.E, 5.A, 5.C	
5	Define roles and responsibilities across the team to improve care	5.C	
6	Deepen patient self-management support to improve clinical outcomes	3.A, 5.C, 6.B	
7	Link patients to resources outside of the clinic to support patients	3.D, 5.C, 5.D, 5.E	

Full Research Article: Coleman et al. (December 2021). [Improving Quality Improvement Capacity and Clinical Performance in Small Primary Care Practices](#). *Annals of Family Medicine*, 19(6):499-506.

Helpful resource for primary care providers: patient decision aids

The Washington State Health Care Authority has created a list of certified [Patient Decision Aids \(PDAs\)](#) to help patients and their providers decide on care options when it comes to cancer screenings, end of life care, labor and delivery, cardiac care, and other topics.

PDAs help patients understand their choices about whether to have a specific treatment or screening, and the pros and cons of each available option. They also help patients explore how each option relates to their personal values. Research shows that PDAs lead to increased knowledge and a more accurate understanding of risk. When using a PDA, more patients feel comfortable with the decisions they make and the care they receive.

Practices can improve their staff recruiting & retention efforts by becoming a NHSC-approved site

Application cycle ends on May 10th

The application process is now open for eligible healthcare facilities to become National health Service Corps (NHSC)-approved sites. NHSC-approved sites provide outpatient, primary health care services to people in [Health Professional Shortage Areas \(HPSAs\)](#). Once at your site, eligible clinicians can apply for loan repayment assistance. NHSC-approved sites can reach thousands of clinicians seeking work in communities with limited access to care.

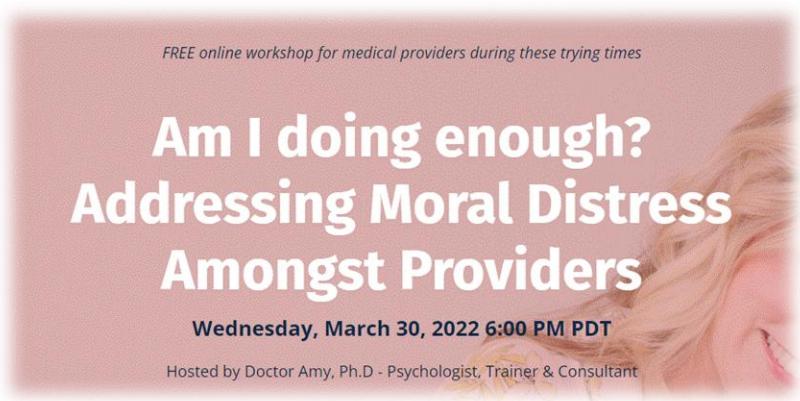
Interested practices can visit the [NHSC Application Page](#) to view additional benefits and eligibility requirements. If you believe that your practice meets the federal standards, contact Liza Root from the [Oregon Primary Care Office \(PCO\)](#) for next steps. Many practices have successfully been approved by working with the PCO during this process. There are currently more than 460 practices in Oregon participating in the National Heath Service Corps.

Liza Root: liza.root@dhsoha.state.or.us

Free moral distress workshop for providers

Wednesday, March 30 at 6:00 pm

Providers and health care staff are often faced with life-altering decisions about care, treatment, and dying. The past couple years have made it even more difficult to cope with the stress and uncertainty that comes with this responsibility. With this in mind, Licensed Psychologist Doctor Amy, Ph.D is hosting a free workshop for medical providers on managing moral stress. The workshop will include 5 ways to mitigate moral distress as well as practical tools to increase competence and decrease overwhelm. Space is limited so [make sure to register](#) soon!



Free, quick online tobacco cessation counseling training (with CME)

This short online course will improve your care team's ability to help patients quit tobacco. The course focuses on **Brief Tobacco Intervention and Motivational Interviewing** techniques. It is self-paced, takes approximately 45 minutes, and can be started, paused and resumed later as needed. [Click here to access the training](#) and feel free to contact Anona Gund at Anona.E.Gund@dhsoha.state.or.us with any questions.

CMEs: This training has been reviewed and is accepted for up to 1.0 prescribed credit from the American Academy of Family Physicians (AAFP). For other licensing boards that may not pre-approve continuing education credits (for example, the Board of Licensed Professional Counselors and Therapists), please submit the certificate of participation to your accrediting body.

Questions?

We are here to help! Contact us at PCPCH@dhsoha.state.or.us.

About the Patient-Centered Primary Care Home Program

Patient-Centered Primary Care Homes (PCPCH) are health care clinics that have been recognized by the Oregon Health Authority (OHA) for their commitment to providing high quality, patient-centered care. The PCPCH Program administers the application, recognition, and verification process for practices applying to become Patient-Centered Primary Care Homes. The program is also working with stakeholders across Oregon to support adoption of the primary care home model. For more information visit www.PrimaryCareHome.oregon.gov.

The mission of the PCPCH Program is to be a trusted partner in primary care, collaborating with stakeholders to set the standard for transformative, whole-person, and evidence-based care.